

Urinary Incontinence in Women



Urinary incontinence is the accidental release of urine. Bladder control problems are very common, especially among older adults. Incontinence usually does not cause major health problems. But it can be embarrassing.

There are many treatments that can cure or improve your symptoms.

What causes incontinence, and what are the symptoms?

There are two main types of incontinence. They have different causes and symptoms. Older women often have a mix of these two types.

Stress incontinence is the most common type of urinary incontinence in women. It occurs when you sneeze, cough, laugh, jog, or do other things that put pressure on your bladder.

- It can be caused by childbirth, weight gain, or other conditions that stretch the muscles that support your bladder.
- It usually results in a small to medium amount of urine loss.

Urge incontinence is also called overactive bladder. It occurs when the urge to urinate is so strong that you cannot reach the toilet in time, even when your bladder contains only a small amount of urine.

- It may be caused by irritation of the bladder, emotional stress, or nerve-damaging conditions such as Parkinson's disease or stroke. Often, what causes it is unknown.
- It can result in a medium to large amount of leaked urine, which may soak clothing or run down your legs.

How is it diagnosed?

- Your doctor will ask about your medical history. Your doctor will also ask about your symptoms and habits—how often you need to urinate, when you leak urine, how much fluid and what kinds of fluids you drink, and whether you have any other symptoms.
- You will have a physical exam, including a pelvic exam.
- Your doctor will probably do tests like a urinalysis and urine culture to see if you have an infection. He or she may do other tests to be sure of the diagnosis.

How is it treated?

You can usually try exercises and lifestyle changes first. If you stick with them and your incontinence is not severe, they may solve the problem.

For **stress incontinence**, your doctor may suggest:

• Pelvic floor (Kegel) exercises. To do these, squeeze the same muscles you would use to stop your urine. Your belly and thighs should not move. Hold the squeeze for 3 seconds, and then relax for 3 seconds. Start with 3

seconds. Then add 1 second each week until you are able to squeeze for 10 seconds. Repeat 10 to 15 times a session. Do three or more sessions a day.

- Medicine such as vaginal estrogen cream or gel.
- A pessary, which is a rubber device that is inserted into the vagina. It supports the urethra and helps keep urine in the bladder.
- Timed urination. You urinate every 2 to 4 hours while you are awake, even if you feel like you do not have to go.
- Losing weight.

You may choose surgery if your problem is severe or other treatments have failed. Surgery can lift the bladder and support the link between the bladder and the urethra.

If you can't have surgery, your doctor may give you a shot of collagen or another material around the urethra to build up the urethra. This is called urethral bulking.

For urge incontinence, your doctor may suggest:

- Diet changes. Cut back on foods that might irritate your bladder. These include citrus fruits, chocolate, tomatoes, vinegars, milk and other dairy foods, spicy foods, and aspartame (NutraSweet, Equal). Avoiding alcohol and caffeine may help too.
- · Bladder training. You increase how long you can wait before you have to urinate. The goal is to lengthen the time between trips to the toilet to every 2 to 4 hours.

· Medicine. These may include anticholinergic and antispasmodic medicines (such as darifenacin, mirabegron, or oxybutynin), or vaginal estrogen.

If these do not work, your doctor may suggest other treatments. These include Botox injections and sacral nerve stimulation.

What you can do at home

- Get in the habit of urinating every 2 to 4 hours, whether you feel the need or not.
- Ask your doctor if any medicines you take could be making your problem worse.
- Limit alcohol and caffeine.
- Wear a tampon while you do activities such as jogging or dancing. At other times, wear absorbent pads or underpants. Or you may want to try to prevent leaks with a product like Poise Impressa, which you insert like a tampon.
- If you have trouble reaching the toilet in time, clear the path to the bathroom, wear clothes that are easy to remove, or keep a bedpan close to your bed or chair.

More long-term steps can make a difference:

- Get regular exercise.
- Do Kegel exercises every day.
- Lose some weight if you need to.
- If you smoke, quit. This may reduce coughing and improve incontinence.

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